



Client's Name: Pet's Name:

Phone: Email: Date:

Yes No

- 1. Has your kitten been eating well?
- 2. Is litterbox training/use going well??
- 3. Is your kitten's activity level normal?
- 4. Is your kitten sneezing or coughing?
- 5. Has there been any diarrhea or vomiting?
- 6. Do you know of any problems with any littermates?

7. What type of food does your kitten eat and how often?

- 8. Has your kitten had any recent surgery?
- 9. Are there any flea or tick problems?

10. What flea/tick preventative are you using for your kitten?

- 11. Will your kitten be going outside as a grown cat?
- 12. Has there been any medical treatment or vaccines at another
veterinary clinic, shelter, or breeder?

13. Has your kitten been tested for FELV/FIV?
If so, when?

14. Does your kitten have a breeder guarantee?
If so, is there anything you need from us today to complete the conditions of the guarantee?

15. Is there anything else we should know about your kitten's health?

Office Use Only: